

59261



RECEIVED
MAY 19 1989
TECHNICAL SUPPORT SECTION

Hook Drugs

2800 Enterprise Street
Indianapolis, Indiana 46219-1189

Mailing Address:
P.O. Box 26285
Indianapolis, Indiana 46226-0285

(317) 353-1451
FAX (317) 351-3007

Writer's Direct Number:

May 18, 1989

Ms. Susan Swales (5HSM-12)
Waste Management Division
U.S. EPA - Region V
230 South Dearborn Street
Chicago, IL 60604

RE: HIMCO LANDFILL SITE, COUNTY ROAD 10, ELKHART, INDIANA

Dear Ms. Swales:

Pursuant to your request in your letter of April 27, 1989, the following information is furnished in response to your questions:

1. a. Type of business: Retail Drugstore.
b. No manufacturing.
c. Wastes generated: paper (primarily corrugated packing materials), empty plastic and glass containers and other miscellaneous trash.
d. Waste disposal: our trash is compacted and combined with the other shopping center's retailers trash and picked up by Himco Waste-Away Service, Inc.
e. 5912.
2. None. We do not generate wastes subject to hazardous waste regulations.
3. Yes. We contracted with Himco Waste-Away, Inc. for trash removal.
4. We have enclosed a copy of the most recent contract with Himco which we could locate and copies of invoices for 1988 through March, 1989. We do not have records prior to 1976. If additional information is needed, please advise.
5. Not applicable.
6. Not applicable.
7. Not applicable.
8. Not applicable.

Hook-SuperRx, Inc.

Ms. Susan Swales

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May 18, 1989

In connection with our earlier answers, please be advised that damaged merchandise is not disposed of as store trash.

As a result of my investigation, it is my opinion that Hook Drugs should not be made a responsible party with reference to the cleanup of this hazardous site.

If we can be of further assistance, please advise but as soon as you have completed your investigation, we ask that you confirm that we are not to be listed as a responsible party.

Very truly yours,

HOOK-SUPERX, INC.
HOOK DRUG DIVISION



Russell D. Mesalam
Vice President
Store Operations

C E R T I F I C A T E

I certify that the above and foregoing information is true and correct to the best of my knowledge and belief and that a diligent search for all documents responsive to this request pursuant to the answers set forth above has been completed.



RUSSELL D. MESALAM

Sworn to and subscribed before me this 18th day of May, 1989.



NOTARY PUBLIC in and for Marion
County, Indiana

SUSAN E. REEVES
NOTARY PUBLIC STATE OF INDIANA
MARION COUNTY
MY COMMISSION EXP. APR 20, 1992

FEDERAL		AIRBILL		PACKAGE TRACKING NUMBER		1933824314	
6280K		1933824314		Date		5-18-89	
From (Your Name) Please Print		Your Phone Number (Very Important)		To (Recipient's Name) Please Print		Recipient's Phone Number (Very Important)	
RUSSELL D. MESALAM		(317) 351-3017		SUSAN SWALES		()	
Company		Department/Floor No.		Company		Department/Floor No.	
HOCKS SUPER X INC				E.P.A.			
Street Address				Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.)			
2800 ENTERPRISE ST				230 SOUTH DEARBORN STREET			
City		State		City		State	
INDIANAPOLIS IN		46219		CHICAGO IL		60604	
YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE)				IF HOLD FOR PICK-UP, Print FEDEX Address			
PAYMENT <input type="checkbox"/> Bill Sender <input type="checkbox"/> Bill Recipient's FedEx Acct. No. <input type="checkbox"/> Bill 3rd Party FedEx Acct. No. <input type="checkbox"/> Bill Credit Card				City			
<input checked="" type="checkbox"/> Cash				State			
				ZIP Required			
SERVICES		DELIVERY AND SPECIAL HANDLING		PACKAGES		WEIGHT	
1 <input checked="" type="checkbox"/> PRIORITY 1 Overnight Delivery		1 <input type="checkbox"/> HOLD FOR PICK-UP (Fill in Box 1)		1 LB 5			
2 <input type="checkbox"/> GROUND 48 HOURS		2 <input checked="" type="checkbox"/> DELIVER WEEKDAY		2 LB 5			
3 <input type="checkbox"/> GROUND 72 HOURS		3 <input type="checkbox"/> DELIVER SATURDAY (Extra charge)		3 LB 5			
4 <input type="checkbox"/> GROUND 96 HOURS		4 <input type="checkbox"/> DANGEROUS GOODS (Extra charge)		4 LB 5			
5 <input type="checkbox"/> GROUND 120 HOURS		5 <input type="checkbox"/> CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)		Total		Total	
6 <input type="checkbox"/> OVERNIGHT LETTER*		6 <input type="checkbox"/> DRY ICE (Extra charge)		Total		Total	
7 <input type="checkbox"/> GROUND 144 HOURS		7 <input type="checkbox"/> OTHER SPECIAL SERVICE		Received At		Emp. No.	
8 <input type="checkbox"/> GROUND 168 HOURS		8 <input type="checkbox"/> SATURDAY PICK-UP (Extra charge)		1 <input type="checkbox"/> Regular Stop		Date	
9 <input type="checkbox"/> GROUND 192 HOURS		9 <input type="checkbox"/> HOLIDAY DELIVERY (If offered) (Extra charge)		2 <input type="checkbox"/> On-Call Stop		Federal Express Use	
10 <input type="checkbox"/> GROUND 216 HOURS				3 <input type="checkbox"/> Drop Box		Base Charges	
11 <input type="checkbox"/> GROUND 240 HOURS				4 <input type="checkbox"/> B.S.C.		Declared Value Charge	
12 <input type="checkbox"/> GROUND 264 HOURS				5 <input type="checkbox"/> Station		Other 1	
*Declared Value Limit \$100				FEDEX Corp. Employee No.		Other 2	
				Date/Time for FEDEX Use		Total Charges	
				Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.		PART #111800	
				Release Signature:		REVISION DATE	
						PRINTED IN U.S.A.	
						009	
						© 1987 F.E.C.	